GENERAL FACT SHEET

10-117

BILL NUMBER

BRIEF TITLE
Environmental Public Health
Permit Fee Increases

APPROVAL DEADLINE

REASON

To provide adequate revenue to meet the budget.

DETAILS POSITIONS/RECOMMENDATIONS Sponsor Board of Health Increase and create fees specified in: - LMC 8.06 Air Pollution - LMC 8.08 Body Art - LMC 8.12 Small Family Child Care Homes Program All automated departments - LMC 8.14 Child Care Programs Departments, or Various Programs - LMC 8.20 Lincoln Food Code **Groups Affected Environmental Public Health** - LMC 8.24 Noise Control Ordinance Regulated industry, businesses and entities - LMC 8.38 Public Swimming Pools Applicants/ **Applicant** - LMC 8.40 Spa Facilities **Proponents** - LMC 8.44 Water Wells Health Department City Department Health Other Board of Health Discussion (Including Relationship to other Opponents Groups or Individuals **Council Actions**) To meet the Health Department's budget, None specifically identified incremental fee increases (approximately 3% for most fees) are proposed, which address Basis of Opposition operational costs. These fee increases will assure the Health Department meets its revenue Staff requirements for the budget. This revenue will Recommendations Reason Against allow the Department to provide required services to business, industry, and homeowners, and to protect human health and our environment. Board or BY: Board of Health Commission Recommendation □ No Action Taken ☐ For with revisions or conditions (See Details column for conditions) CITY COUNCIL Pass □ Pass (As Amended) ACTIONS (For Council Use Council Sub. Only) ■ Without Recommendation ☐ Hold Do not Pass

DE I AILS	POLICY/PROGRAM IMPACT	
	POLICY OR PROGRAM CHANGE	NO DYES
	OPERATIONAL IMPACT ASSESSMENT	Fee increases are necessary to maintain regulatory program functions required by Lincoln Municipal Code.
	FINANCES	
	COST AND REVENUE PROJECTIONS	COST of total project: \$ 0 COST of this Ordinance/ Resolution \$ 0
		RELATED annual operating Costs \$ 0
		INCREASE REVENUE EXPECTED/YEAR \$8,000
	SOURCE OF FUNDS	CITY [Approximately] \$
¢.	BENEFIT COST Front Foot Square Foot	Average Assessment \$\$

APPLICABLE DATES:

FACT SHEET PREPARED BY: Scott E. Holmes, Environmental Public Health Division Manager

REVIEW BY:

REFERENCE NUMBER